CATAWBA COUNTY EMERGENCY OPERATIONS PLAN ANNEX G EMERGENCY MEDICAL SERVICES

I. PURPOSE

This Annex provides assistance to the general public by administering medical services during a natural, man-made, or technological emergency.

II. SITUATION AND ASSUMPTIONS

A. Situation

- 1. Most emergency situations can lead to physical harm or bring about other internal medical problems.
- 2. A well-planned medical support network is essential during emergency situations.
- 3. Depending on the nature of the incident, complications may include traumatic injury or even death.

B. Assumptions

- 1. A large-scale emergency may result in increased demands on hospitals, medical, and emergency medical transport services personnel.
- 2. Many injuries both minor and relatively severe, will be self-treated by the public.
- 3. Many of the injured will be transported to medical facilities by people other than medical personnel.
- 4. EMS is most critical within the first 30 minutes of the emergency. Mutual aid assistance usually arrives after this critical period.
- 5. Resources available through area and regional medical services mutual aid agreements will be provided.

- 6. When local resources can no longer meet the demand of the situation, State agencies will be contacted to provide additional resources and/or assume control of the response.
- 7. Catastrophic disasters may affect large areas of the County and medical resources may be damaged destroyed, or unavailable.
- 8. Standard operating guidelines will be developed to guide emergency medical responders in the treatment of patients and personnel involved with radiological and hazardous materials incidents.

III. CONCEPT OF OPERATIONS

- A. Emergency operations for EMS services will be an extension of normal agency and facility duties.
- B. Coordination between EMS/Rescue providers is necessary to ensure emergency operational readiness.
- C. EMS will provide field medical care as needed during emergency situations and coordinate necessary medical transportation.
- D. EMS capabilities will be expanded by volunteer first aid and rescue squads serving the respective response areas.
- E. During mass casualty incidents, EMS will establish patient triage, holding, treatment and transportation areas.
- F. When necessary an EMS official will be located at an established command post to coordinate responding medical units and establish communication links with hospitals and the Communications Center.
- G. Transfer of authority on-scene will be in accordance with established procedures.

IV DIRECTION AND CONTROL

A. The EMS manager will direct and control EMS operations. For on-scene

incidents, the senior officer will assume direction and control.

- B. The EMS manager will maintain communications with their field forces and will keep the EOC informed of activities performed along with personnel and equipment needed to maintain adequate response and recovery efforts.
- C. The EMS manager will coordinate efforts between the County EMS and the Volunteer Rescue Squads in the event of an emergency situation.

V. CONTINUITY OF GOVERNMENT

- A. Line of Succession
 - 1. Emergency Medical Services Manager
 - 2. Emergency Medical Services Training Officer
 - 3. Emergency Services Director